

§ 18A 23 Rev. 5/98		FINANCIAL AFFIDAVIT IN SUPPORT OF REQUEST FOR ATTORNEY, EXPERT OR OTHER COURT SERVICES WITHOUT PAYMENT OF FEE	
IN UNITED STATES <input type="checkbox"/> MAGISTRATE <input checked="" type="checkbox"/> DISTRICT <input type="checkbox"/> APPEALS COURT or <input type="checkbox"/> OTHER PANEL (Specify below)			
IN THE CASE OF USA v.s. James Troiano		LOCATION NUMBER <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	
PERSON REPRESENTED (Show your full name) James Troiano		1 <input type="checkbox"/> Defendant--Adult 2 <input type="checkbox"/> Defendant - Juvenile 3 <input checked="" type="checkbox"/> Appellant 4 <input type="checkbox"/> Probation Violator 5 <input type="checkbox"/> Parole Violator 6 <input type="checkbox"/> Habeas Petitioner 7 <input type="checkbox"/> 2255 Petitioner 8 <input type="checkbox"/> Material Witness 9 <input type="checkbox"/> Other	
CHARGE/OFFENSE (describe if applicable & check box →) <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor 18 USC S 1951&2, 924(c), 922(g)(1)&924(e)		DOCKET NUMBERS Magistrate District Court 05-261-01 Court of Appeals	

ANSWERS TO QUESTIONS REGARDING ABILITY TO PAY

EMPLOYMENT	Are you now employed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Am Self-Employed	
	Name and address of employer: _____	
	IF YES, how much do you earn per month? \$ _____	IF NO, give month and year of last employment 11/1994 How much did you earn per month? \$ 1,200
ASSETS	If married is your Spouse employed? <input type="checkbox"/> Yes <input type="checkbox"/> No	
	IF YES, how much does your Spouse earn per month? \$ _____	
	If a minor under age 21, what is your Parents or Guardian's approximate monthly income? \$ _____	
OTHER INCOME	Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	RECEIVED	SOURCES
	IF YES, GIVE THE AMOUNT RECEIVED & IDENTIFY THE SOURCES \$ _____	
CASH	Have you any cash on hand or money in savings or checking accounts? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No IF YES, state total amount \$ _____	
	Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	VALUE	DESCRIPTION
PROPERTY	IF YES, GIVE THE VALUE AND DESCRIBE IT _____	

DEPENDENTS	MARITAL STATUS <input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input checked="" type="checkbox"/> SEPARATED OR DIVORCED		Total No. of Dependents 2	List persons you actually support and your relationship to them I have two children but do not pay support
OBLIGATIONS & DEBTS	DEBTS & MONTHLY BILLS <small>(LIST ALL CREDITORS, INCLUDING BANKS, LOAN COMPANIES, CHARGE ACCOUNTS, ETC.)</small>			
	Creditors	Total Debt	Monthly Paymt.	
	APARTMENT OR HOME: restitution \$ 14,460.00 assessment \$ 400.00			
		\$ _____	\$ _____	
		\$ _____	\$ _____	
		\$ _____	\$ _____	

I certify under penalty of perjury that the foregoing is true and correct. Executed on (date)

9/19/2006 - 9-20-06

 SIGNATURE OF DEFENDANT
 (OR PERSON REPRESENTED)

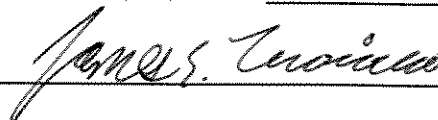


EXHIBIT "A"